

## COMPLIANCE REVIEW WORKSHEET

FACILITY NAME: Bedford County LF #2 PERMIT NO.: 560

YEAR	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	TOTAL
Inspections/Year	0	3	6	3	4	4	4	9	8	11	52
Disclosure Statement	0	1	0	0	0	0	0	0	0	0	1
Discharge to State Waters	0	0	0	1	0	0	0	0	0	0	1
GW Monitoring Program	0	0	0	0	0	0	0	0	0	0	0
Corrective Action Program	0	0	0	0	0	0	0	0	0	0	0
GW Monitoring System	0	0	0	0	0	0	0	0	0	0	0
Decomposition Gas	0	0	0	0	0	0	0	0	0	0	0
Financial Responsibility	0	0	0	0	0	0	0	0	0	0	0
Gas Management Plan	0	0	0	0	0	1	0	0	0	0	1
Open Burning	0	0	0	0	0	0	0	0	0	0	0
Authorized Waste Acceptance	0	0	0	0	0	0	0	0	0	0	0
Leachate System/Monitoring	0	0	0	0	0	0	0	0	0	0	0
Facility Design/Construction	0	0	2	0	0	0	0	0	0	0	2
HW/PCB Inspection	0	0	0	0	0	0	0	0	0	0	0
Compaction and Cover	0	3	1	1	0	0	0	0	0	0	5
Operators/Equip./Training	0	0	1	0	0	0	0	0	0	0	1
Closure Plan	0	0	0	0	0	0	0	0	0	0	0
Special Waste Disposal	0	0	1	0	0	0	0	0	0	0	1
Fire Control and Plan	0	0	0	0	0	0	0	0	0	0	0
Operator Certification	0	2	0	0	0	0	0	0	0	0	2
Access Control/Attendant	0	0	0	0	0	0	0	0	0	0	0
Disease Vector Control	0	0	0	0	0	0	0	0	0	0	0
Monitoring Recording/Rptng.	0	0	0	0	0	0	0	0	0	0	0
Permittee Reporting Rqmts.	0	0	0	0	0	0	0	0	0	0	0
Housekeeping	0	2	1	2	0	0	0	0	0	0	5
Waste Records Maintained	0	0	0	0	0	0	0	0	0	0	0
Active Safety Program	0	0	0	0	0	0	0	0	0	0	0
Miscellaneous	0	0	0	0	0	0	0	0	0	0	0
<b>TOTALS</b>	<b>0</b>	<b>8</b>	<b>6</b>	<b>4</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>19</b>

AVERAGE VIOLATIONS PER INSPECTION: 0.37